



**For EAA Use Only**

Form: EAA 2 (Jan 2018)

Entity ID: \_\_\_\_\_

Facility ID: \_\_\_\_\_

900 E. Quincy, San Antonio, Texas 78215  
(210) 222-2204 or 1-800-292-1047 Fax (210) 222-9869

# STORAGE TANK REGISTRATION – CONTRIBUTING ZONE

1. This registration must be completed, signed, and submitted to the Edwards Aquifer Authority (EAA) for any existing or new facility containing a regulated tank as defined in EDWARDS AQUIFER AUTHORITY RULES. These regulations may be viewed on the EAA website at <http://www.edwardsaquifer.org>.
2. The registration must be typed or printed legibly using ink.
3. Information submitted pursuant to this registration form shall be revised to address any related changes that may occur at the facility.
4. Incomplete registrations will be returned to the registrant for completion.
5. Each registration shall be **renewed every three years**.

**I. - Facility Information:** Please provide the following:

1. Facility Name: \_\_\_\_\_
2. TCEQ Regulated Entity Number: (If applicable RN + 9 digits) \_\_\_\_\_
3. Physical Address: (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (Zip) \_\_\_\_\_
4. Mailing Address: (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_
5. Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_
6. Contact Full Name: \_\_\_\_\_ Contact Telephone No. ( ) \_\_\_\_\_
7. Total number of regulated Aboveground Storage Tanks (AST) included in registration: \_\_\_\_\_
8. Total number of regulated Underground Storage Tanks (UST) included in registration: \_\_\_\_\_

**II. - Registration Type:**

Initial Registration (i.e. The facility has never been registered with the EAA.)

Amendment:

Three-year renewal

Operator Information

Other(specify): \_\_\_\_\_

Ownership Information

Operational Status

Facility Information

System Information

**III. – Applicant Information:** Please note, if the applicant is a **Partnership**, the name of the partnership shall be followed by the words “a partnership” and if a **Trustee** acting on behalf of another, the trustee’s name shall be followed by the word “trustee”. If one **other than the named applicant** executes the registration, the person executing the registration shall complete Part IV of this registration.

**Section A – Tank Owner:**

1. Name: \_\_\_\_\_
2. TCEQ Customer Number: (If applicable CN + 9 digits) \_\_\_\_\_
3. Telephone No. (    ) \_\_\_\_\_ Facsimile No. (    ) \_\_\_\_\_
4. Physical Address: (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (Zip) \_\_\_\_\_
5. Mailing Address: (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_ (Zip) \_\_\_\_\_
6. Contact Full Name: \_\_\_\_\_ Contact Telephone No. (    ) \_\_\_\_\_
7. Contact Job Title: \_\_\_\_\_ Contact E-mail Address: \_\_\_\_\_
8. Contact Mailing Address: (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_ (Zip) \_\_\_\_\_

**Section B – Tank Operator:** If different from Owner, please provide the following:

1. Name: \_\_\_\_\_
2. TCEQ Customer Number: (If applicable CN + 9 digits) \_\_\_\_\_
3. Telephone No. (    ) \_\_\_\_\_ Facsimile No. (    ) \_\_\_\_\_
4. Physical Address: (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (Zip) \_\_\_\_\_
5. Mailing Address: (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_ (Zip) \_\_\_\_\_
6. Contact Full Name: \_\_\_\_\_ Contact Telephone No. (    ) \_\_\_\_\_
7. Contact Job Title: \_\_\_\_\_ Contact E-mail Address: \_\_\_\_\_
8. Contact Mailing Address: (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_ (Zip) \_\_\_\_\_

**IV. – Authorized Representative Information:** If the applicant designates an authorized representative:

1. Name: \_\_\_\_\_
2. Telephone No. (    ) \_\_\_\_\_ Facsimile No. (    ) \_\_\_\_\_
3. Physical Address: (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (Zip) \_\_\_\_\_
4. Mailing Address: (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_ (Zip) \_\_\_\_\_
5. Contact Name: \_\_\_\_\_ Contact Telephone No. (    ) \_\_\_\_\_
6. Describe relationship to applicant (agent, officer, attorney, etc...) \_\_\_\_\_
7. Contact Job Title: \_\_\_\_\_ Contact E-mail Address: \_\_\_\_\_
8. Contact Mailing Address: (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_ (Zip) \_\_\_\_\_

**V. - Tank Information:**

Please note, if you require additional pages, please duplicate this page and attach to the registration. If a tank has multiple compartments, please separately record each compartment on its own page (i.e. Tank 1A and Tank 1B). Please ensure that all applicable boxes are checked.

<b>1</b>	<b>Tank Identification</b>	
	TCEQ Tank ID: _____	EAA TANK ID (Provide, if no TCEQ Tank ID): _____
<b>2</b>	<b>Tank Type</b>	
	<input type="checkbox"/> AST <input type="checkbox"/> UST	
<b>3</b>	<b>Capacity</b>	
	_____ Gallons	
<b>4</b>	<b>Substance Stored</b>	
	<input type="checkbox"/> Gasoline <input type="checkbox"/> New Oil <input type="checkbox"/> Used Oil <input type="checkbox"/> Diesel <input type="checkbox"/> Av Gas <input type="checkbox"/> Other (Please Specify): _____	

<b>1</b>	<b>Tank Identification</b>	
	TCEQ Tank ID: _____	EAA TANK ID (Provide, if no TCEQ Tank ID): _____
<b>2</b>	<b>Tank Type</b>	
	<input type="checkbox"/> AST <input type="checkbox"/> UST	
<b>3</b>	<b>Capacity</b>	
	_____ Gallons	
<b>4</b>	<b>Substance Stored</b>	
	<input type="checkbox"/> Gasoline <input type="checkbox"/> New Oil <input type="checkbox"/> Used Oil <input type="checkbox"/> Diesel <input type="checkbox"/> Av Gas <input type="checkbox"/> Other (Please Specify): _____	

<b>1</b>	<b>Tank Identification</b>	
	TCEQ Tank ID: _____	EAA TANK ID (Provide, if no TCEQ Tank ID): _____
<b>2</b>	<b>Tank Type</b>	
	<input type="checkbox"/> AST <input type="checkbox"/> UST	
<b>3</b>	<b>Capacity</b>	
	_____ Gallons	
<b>4</b>	<b>Substance Stored</b>	
	<input type="checkbox"/> Gasoline <input type="checkbox"/> New Oil <input type="checkbox"/> Used Oil <input type="checkbox"/> Diesel <input type="checkbox"/> Av Gas <input type="checkbox"/> Other (Please Specify): _____	

Initial: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

**VI. - General Storage Requirements:**

EDWARDS AQUIFER AUTHORITY RULES, Ch. 713 (Water Quality), Subch. G (Aboveground and Underground Storage Tanks), §713.614 requires, regardless of any provisions or exemption contained in the subchapter, any storage of regulated substance be done in a manner that prevents the physical damage to the container, such as crushing, puncturing, rupture, or corrosions and protects against damage from exposure to the elements.

**VII. - Certification:**

I certify that, as the Registrant, I am the Owner or Operator of the tank(s) which is the subject of this Registration, or their Authorized Agent. Additionally, I certify that each and all of the statements and information contained herein are true and correct to the best of my knowledge and belief. Moreover, I agree to fully comply with the terms of the Edwards Aquifer Authority Act and the rules of the Authority.

Signature of Owner, Operator, or Agent: \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_

Print Name: \_\_\_\_\_

Co-Signature (if applicable): \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_

Print Name: \_\_\_\_\_